SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LOI OIIII 3X)	Use seperate schedule(s)		OR LIN check or	e NUMBE				NGE	20 / 22	2
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	تنا	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)	and address of any political c	50111111	illoc to s	SOIICIT COITE	iibatio	13 11011	130011	, OITIII		
Jim Beam Brands Co. Political Action Com	mittee									
Full Name (Last, First, Middle Initial)					_	B23.4	471			
MELISSA BEAN FOR CONGRESS				of Disl	bursem		, v	Y	Y	
Mailing Address POST OFFICE BOX 3068				1 0		20	ָבוֹל <u>'</u>	2 (0 Ď 6	
,	State Zip Code L 60010			Amou	unt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement			-	T L.				. 5	500.0	0
political contribution Candidate Name Category/										
			pe							
Office Sought: X House Disburser Senate	nent For: 2006 Primary X General									
President	Other (specify)									
State: IL District: 08										
Full Name (Last, First, Middle Initial)							B23.4	477		
MIKE ROSS FOR CONGRESS COMMITTEE			Date	of Disl	oursem	nent	, Y	Y	Υ	
Mailing Address PO Box 360				1 0		2 0	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	2 (0 Ď 6	
•	State Zip Code AR 71857			Amou	unt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement political contribution								į	500.0	0
Candidate Name		Cate	gory/							
			pe							
Office Sought: X House Disburse										
Senate President	Primary X General Other (specify) ▼									
State: AR District: 04										
Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRESS					n ID: S	B23.4	469			
			M	M /	2 0		, Y	0 ŏ 6	Υ	
Mailing Address 5429 Madison Avenue				1 0						
,	State Zip Code CA 95841			Amou	unt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement political contribution			T L.				1(0.00	0	
Candidate Name			gory/ pe							
Office Sought: X House Disburse										
Senate	Primary X General									
State: CA District: 01	Other (specify) ▼									
SURTOTAL of Dichurcements This Dage (entione)							-	20	0.00	0
SUBTOTAL of Disbursements This Page (optional)					-		-		, ,,,	-
TOTAL This Period (last page this line number only)			•	L.						